ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			<u> </u>
O.I.P.E. CLASSIFIER		19	52801
FORMALITY REVIEW	H-T	र्वार्च	06/09/01
RESPONSE FORMALITY REVIEW			100(201701

INDEX OF CLAIMS

~	Rejected	N	Non-elected
=	Allowed	- 1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	Λ	Ohiected

÷ Restricted 0 Objected									
Claim 3	Date	Claim	Date	Claim	Date				
Final Original Z		Final Original		Final Original					
(1)/(4)		51		101					
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3 2		53		103					
4 2		54		104					
6 0		55		105					
7		56		106					
8 1		58		108	- 				
9711		59		109					
10		60		110					
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31		81		131					
32		82	+++++	132	-1-1-1-1-1-1				
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36		86		136					
37		87		137					
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42		92		142					
43		93		143					
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47		97		147					
48		98		148					
50	- - - 	100	 	149					
				150					

BEST AVAILABLE COPY



If more than 150 claims or 10 actions staple additional sheet here